٠. ١		(Column 1)	PARI (-		V41751,627	
/ . i	BASIC FEE	MUMBER FILED	(Column 2)		MALL ENTITY	OR '	OTHER THAN	
- 1	(3) OFR 1.16(a))		NUMBER EXTR	A . RAT	TE COL	7	SMALL ENITH	
	TOTAL CLAIMS (37 CFR 1.16(c))		· · ·		FEE	1	RATE - FE	
- 13	INDEPENDENT CLAIMS (37 CFR 1.16(b))	minus 20 m	· · · · · ·	1,2	-	OR	5	
1		minus) z	·	x s 100	5	OR X's	50.	
. [.	MULTIPLE DEPENDENT CLAIMPRESENT (37 CFR 1.16(d)) If the difference in column 1 isless than zero, enter "0" in column 2.				+5.180		200	
•	ti the difference in column 1 is	less than zero, enter to	" in column 2	-1 [+5:100	4	OR +	360	
	CLAIMSA	S AMENDĘD – PA	APT II	FOTAL		OR V	DTAL	
	JE (Column			•		•	//AL	
4	CI2 CLAIN	is T	ciuma 21. (Column	3) SMai	LENTITY			
13	Op REMAIN	- NO	GHEST IMBER: PRESEN VIOUSLY EXTRA	RATE	1	OR	OTHER THAN SMALL ENTITY	
. S	Total AMENDM	Minus	O FOR	1 1	ADDI- FIONAL	RA		
AMENDMENT	Independent (3) OFR 1,15pg	Minus	8	1,25.	FEE		.TIONEL	
₹	FRST PRESENTATION OF AUG		3	x s 100.	1	OR xs5) .	
.	FRST PRESENTATION OF MUR	TIPLE DEPENDENT CLA	M (37 CFR 1,16(#))	+ \$ 180.	1	OR x 20	Q	
11-2	4-07	*		TOTAL	 	OR 1+31a	2	
0	CLAIMS		uma 2) (Column 3)	. ADO'L FEE	· ,	OR ADO'L FO	ie .	
AMENDMENT	REMAINING	I RUM	EST POSSES	0479				
18	Total AMENDMEN	Migur 11	FOR EXTRA	. RATE	ADDI. TIONAL	RATE	ADDÍ	
	Independent D	Migra b	8 -	x . 25.	FEE	<u> </u>	TIONAL FEE	
₹,	TRET PRESENTATION OF MER TO	1 } <	3 =	x s 100.	· OI			
1 14	1 14 15 211 25 111 OR X \$ 200							
\mathbf{L}^{-1}		1,58,		TOTAL ADO'L FEE	. OF	TOTAL		
0	(Column 1)	(Colum	n 2) (Column 3)		OR	ADD' FEE		
12.	REMAINING AFTER	NUMBE PREVIOU	R PRESENT	RATE				
No C	Total CPR 1.16(d)	Minus PAID FO	R		ADDI. TIONAL	RATE	ADOI:	
AMENDMENT	ependent OPR 1.16(a))	Minus	3	x, 25.	FEE	-	TIONAL FEE	
₹ FIR	ST PRESENTATION OF MIR TIPL		-	x 5 100	OR-	x,50.		
FIRST PRESENTATION OF MIRTIPLE DEPENDENT CLAIM (3) CFR 1.16(d) + 5 180.								
If the entry in column 1 is less than the entry in column 2, write "0" in column 1. If the "Highest Number Previously Paid For In THIS SPACE is less than 20, enter "20". Total OR ADOL FEE OR ADOL FEE Total OR ADOL FEE The "Highest Number Previously Paid For In THIS SPACE is less than 20, enter "20".								
· "If the	e Highest Number Previously Highest Number Previously	Paid For IN THIS SPA Paid For IN THIS COA	write "0" in column J. CE is less than 20, ent	r '20'.	OR	ADO'L FEE		
This collecti JSPTO to p								

If the Highest Number Previously Paid For IN THIS SPACE is less than 3, enter 3.

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes in completed application form to the USPTO. Fine with vary depending upon the information of the amount of time you require to complete this form and/or suggestions for reducing Inis burden, should be sent to the Chief Information Officer, U.S. Department of Commercice, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS, SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.